SUMMARY SHEET

	Change in Company's premium or rate	e level produced by rate revision effective	May 1, 2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger	•	
	Commercial	\$600,023	+5.5%
2.	Automobile Physical Damage Private Passenger		
	Commercial	\$254,139	+1.0%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (ter	rritories) or certain classes? If so, specify:	
* Ac			

American Hardware Mutual Insurance Company Name of Company

Michael L. Wiseman, Treasurer, CFO Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate Revision effective April 1, 2009.

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial	6,553,663	+12.4%
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial	2,757,328	0.0%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.			
8.	Boiler and Machinery		
	Fire		
	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.			
14.	Crop Hail		
15.	Other		
	Line of Insurance		
App	filing only apply to certain territory (lies only to trucks and trailers Liab bers above are estimated based up 3.	oility loss costs written on Moto	r Carrier policies. The
New	description of filing. (If filing follow loss cost multiplier developed to a ks and trailers written on Motor ca	pply specifically to Liability los	

Continental Western Insurance Company
Name of Company

^{**} Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective			05/01/09	
	(1)	(2) Annual Premium	(3) Percent	
	<u>Coverage</u>	<u>Volume (Illinois)*</u>	Change (+ or -)**	
1.	Automobile Liability			
	Private Passenger			
	Commercial	\$5,509,419	0.0%	
2	Automobile Physical Damage			
۷.	Private Passenger			
	Commercial	\$2,340,017	0.0%	
2		Ψ£,070,011	0.070	
_	Liability Other Than Auto			
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7 .	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage			
	Inland Marine			
•	Homeowners			
	Commercial Multi-Peril			
	Crop Hail			
	Other			
13.	Line of Insurance		-	
	Line of insurance		,	
	es filing only apply to certain territory (territor			
Brie	ef description of filing. (If filing follows rates of	of an advisory organization, specify or	ganization):	
	Remove restriction of limiting Individual Ris	sk Premium Modifications (IRPM) for F	-leet, Non-Fleet,	
	and Garage vehicles to +/-50%			
*A	djusted to reflect all prior rate changes. hange in Company's premium level which w	ill result from application of new rates		
		Erie Insurance		
		Name of C	Company	
		Lass Fonticell	-	
		Ross C. Fontidella, ACAS, MAA	V A	

Vice President and Manager

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective _		01/01/2009	
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private	05.044	.O. 70/
^	Passenger Commercial	85,341	+2.7%
۷.	Automobile Physical Damage Private Passenger Commercial	28,447	-1.7%
3	Liability Other Than Auto		
	Burglary and Theft		
	Glass	W	
	Fidelity		
	Surety		
	Boiler and Machinery		
	Fire		
10.	Extended Coverage		
11.	Inland Marine _		
. —	Homeowners _		
	Commercial Multi-Peril _		
	Crop Hail _	2110	
15.	Other		
	Line of Insurance		
For Far For Mo	ss surcharge for Garage Liability for M had directions to apply the surcharge ely to garage liability.	rates of an advisory organization, specify otorcycle Sales. Additionally: In the previto all coverages for some classes but for the classes but for the classes surcharge to apply ONLY to gara	ous editions of the classification index, rother classes to apply the surcharge
		•	
	avy Truck Sales tor Home Sales		
	djusted to reflect all prior rate changes. Change in Company's premium level wh	nich will result from application of new rate	es.
		Firet Fina	ancial Insurance Company
			Name of Company
		Balara St.	mus
			Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective DECEMBER 1, 2008

. 	(1)	(2) Annual Premium	(3) Percent
4	Coverage	- Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial	2545,087	-5.5%
2	Automobile Physical Damag		
	Private Passenger	2-1-20-	
3.	Commercial Liability Other Than Auto	371,225	-5.5%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire	,	·
10. 11.	Extended Coverage Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to cer	tain territory (territories) or c	ertain
	Classes? If so		
	specify:	No	
	Brief description of filing. (If Organization, specify		-
	organization):	REDUCTION OF	- RATE SUE TO
	EXPERIENCE.		
	*Adjusted to reflect all prior **Change in Company's pre	rate changes mium level which will result	from application of new
	rates.		
		FIRST NOW	PROPIT INS. CO.
		/ Nam	e of Company 5UP/CFC
		01	fficial - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 2/1/2009 New; 4/1/2009 Renewals .

	(1)	(2)	(3)
	` ,	Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
			
1.	Automobile Liability		
	Private Passenger		0.50/
	Commercial	\$27,715	-2.5%
2.	Automobile Physical Damage		
	Private Passenger		2.5%
	Commercial	\$8,092	-2.5%
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
LO.	Extended Coverage		
L1.	Inland Marine		
L2.	Homeowners		
L3.	Commercial Multi-Peril		
L4.	Crop Hail		
L5.	Other		
	Line of Insurance		
Door	filing only apply to certain	territory (territories)	or certain
	ses? If so, specify: No.	territory (territories)	or ceream
Clas	ses? II so, specify: No.		
Brie	ef description of filing. (If	filing follows rates of	an advisory
	nization, list organization):		
	njunction with I.S.O.'s most recent loss co		
	5%. Also, expansion of secondary class		

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Goodville Mutual Casualty Company

Name of Company

Brian Frankhouser, Actuarial Analyst
Official ~ Title

SUMMARY SHEET

•	Change in Company's premium or rate	level produced by rate revision effective	e 03/01/09
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial	23,900	0.0
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		%
	Line of Insurance		
Does f	iling only apply to certain territory (ter	ritories) or certain classes? If so, speci	fy:
NO			
Daine.	description of filing. (If filing follows	rates of an advisory organization speci	fy organization):
	and Rental rate revision	rates of all advisory organization, speci	ry organization).
Lease	and Remai rate revision		
* A	djusted to reflect all prior rate changes.		
	hange in Company's premium level wh		
	sult from application of new rates.		
	· · · · · · · · · · · · · · · · · · ·		
		**	N. 11
		Har	co National Insurance Company
			Name of Company
		Jim	Breitbach - Compliance
			cialist
			Official Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate le	vel produced by rate revision effective	December 29, 2008
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial	1,499,679	-8.1%
Automobile Physical Damage	1, 100,070	
	1,085,975	-2.0%
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Does filing only apply to certain territory (territories) or certain classes? If so, specify:	No
Cont Stine CA COCC DDL A4	rates of an advisory organization, specify	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level w	hich will result from application of new rates.	
	Navigator	s Insurance Company
		ame of Company
	Joa	nne Burns, AVP
		Official – Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective <u>04/01/2009 new and 05/01/2009 renewal</u>

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
	Passenger Commercial	4,372,326	1.0%
	Automobile Physical Damage Private Passenger Commercial	2,899,347	-1.0%
	Liability Other Than Auto		
	Burglary and Theft		
	Glass		
	Fidelity Surety		
	Boiler and Machinery		
	Fire		
10.	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other Line of Insurance		
Doe		(territories) or certain classes? If so, specify	: Commercial Auto
fact	tors for New Venture, revised the r	rates of an advisory organization, specify of eference to Credit Based Insurance Score	organization): We have decreased the and added Driver Tier Factors and
inst	trucations for Transition Modification.		
_			
_			
	ljusted to reflect all prior rate changes hange in Company's premium level v	s. which will result from application of new rates	3 .
		Northla	nd Insurance Company
			Name of Company
		Amv Ozn	nun - State Filing Analyst
			Official - Title